

Erica Coulston  
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Bloomfield Hills 48301

My name is Erica Coulston. I am here in opposition to this legislation as an individual that lives with a catastrophic injury from a motor vehicle accident, a constituent, a taxpayer and a medical service provider.

On October 4, 2001 I flew from LA, where I was living and working at the time, to the Detroit area, where I was born and raised, to visit my family and celebrate my parent's 25<sup>th</sup> wedding anniversary. Little did I know how much my life would change in just a few hours- in the early morning hours of October 7, 2001 I became the victim of a terrible single car accident. I was instantly paralyzed- unable to move my arms or any part of my body from the chest down. At 23, in the blink of an eye I became a quadriplegic due to a spinal cord injury at C6/7 and my life will never be the same.

In case there are some of you on this committee or in the audience that are unaware of the extent to which a catastrophic spinal cord injury, such as mine, can change the very fundamental nature of the body and life as we commonly know it- allow me to explain:

The most obvious deficiencies is the physical paralysis of my legs, arms, hands and trunk muscles. The spinal cord controls the ability to regulate body temperature- I can no longer sweat like I used to so I often overheat in the summer and shiver most of the winter. My body's ability to regulate blood pressure is also affected. I have no bladder or bowel control.

I require assistance with bladder and bowel care, showering, dressing, preparing meals, amongst other basic needs.

Because of repeated catheterization I am prone to UTI's, kidney stones and have experienced chronic bladder stones that have required multiple surgical procedures in the last two and a half years.

My bone density has diminished due to lack of constant weight bearing and lack of muscle- putting me at greater risk for fracture. At 34 I am pre-osteoporotic. Without special equipment to help me stand and regular, ongoing physical therapy that encourages weight-bearing activities, I would be even more prone to fracture.

I have chronic neuropathic pain- something that 85% of individuals with chronic spinal cord injuries experience. Imagine a constant burning, tingling feeling to most of your body that feels like someone has taken a blow torch to it.

I have developed scoliosis from sitting in a wheelchair and muscle weakness on my right side; this requires therapy and daily strengthening.

The list goes on in terms of secondary medical issues that can and often do arise when living with a spinal cord injury.

Thanks to the extended rehabilitation I have and still do receive, I have regained some function in my arms, abdominal and back muscles, hands and fingers, even my legs. My blood pressure is more normalized; my ability to regulate body temperature has improved. My daily independence has increased with every ounce of strength and recovery that I've made over the last 11 and a half years.

I have friends that are not fortunate enough to have auto no fault insurance coverage- they often suffer from repeated pressure sores, burn, cut or hurt themselves because they lack adequate attendant care coverage and are left alone so family members can work. They use broken wheelchairs, are confined to bed and their house or a nursing home, reusing catheters even sleeping in their wheelchairs because they've been left home alone so their loved ones can make a living.

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The purpose of insurance is to mitigate risk- how often when buying insurance do you actually picture yourself needing the benefits you've purchased, let alone even understanding what those needs might be? Now add tough economic times that have forced hard working individuals and families to make tough choices about how to spend their dwindling incomes. Given the option I'm sure many folks would jump at even a slightly lower auto insurance premium even if it means less benefits.

But do they know that HB 4612:

- Limits our right to a jury trial and will force many issues into legal proceedings when it states that all questions dealing with "whether a charge is reasonable or whether a product or service, or accommodation is medically appropriate or necessary is a question of law to be decided by the court"
- It limits the insured's right to collect attorney's fees --that's me and you
- It states that evidence regarding how the insurer processes claims is inadmissible
- After the single guaranteed rate reduction of \$150/car, there are no guaranteed savings

For those of us already injured and injured in the future:

- Attendant care will be limited to 56 hours per week by family members and 16 hours per day by service providers. Forcing those of us, like myself, that need 24 hour care to use an agency for 16 hours and a family member for 8 hours in order to bridge the gap or to be warehoused in nursing homes.
  - o I know this provision is aimed at many of the catastrophically injured that choose to have family provided attendant care. Personally I will tell you that one of the most difficult things to get used to with this injury and requiring 24 hour care is the loss of privacy and personal space.
  - o No one takes care of you like your family. Many of the aspects of my care are very private, basic things that I cannot do for myself

and cannot feel when they are being done. This is a scary aspect of care that maybe you'll never understand unless you go through it but we rely on those taking care of us to check our skin, to clean us, to make sure we are healthy- should we be penalized because we trust our family members more than an agency?

- Therapy benefits will be limited and extensions of these benefits will be based on an interpretation of what is reasonably likely to produce lasting and significant rehabilitation.
  - o This brings me back to my earlier comments on the legal impact of this bill as this provision is a mechanism for denial
  - o The ongoing therapy that I receive is directly responsible for not only the physical progress that I've made resulting in increased independence but also has contributed to decrease in risk of skin breakdown, respiratory health, digestive health, bone health, psychological and mood improvements, community involvement

Lastly I would like to address the claims that auto insurance companies are charged and pay more than other insurance companies. I often receive invoices from medical service providers seeking payment from me because my auto insurance company has not paid or responded. The most recent instance relates back to a brief hospitalization in July 2012- starting in August I received invoices from the emergency physician group that treated me for \$735. I called each month and made sure they had my auto insurance company's correct address and claim number and the answer for 8 months was the same- we have the correct information and there has been no response. Finally in early April I received this Cofinity Auto statement- they are a third party payer for auto insurance companies that negotiates rates much like most insurance companies have- the rate reduction was \$443.10 and the total amount paid by my auto insurance company was \$291.90 after 9 months of the initial charge. This is proof of their lies that they do not have the same ability to negotiate rates.

I have heard repeatedly that auto insurance companies are charged more than others for same services. You've heard it- a MRI costs auto insurance companies exponentially more than what Medicare or BCBS pays. They say that this legislation will make providers charge auto insurance companies the same amount as other insurances.

HB4612 says that providers must **CHARGE** auto insurance companies rates consistent with payments they **RECEIVE** from other insurers

This would violate Federal law and is illegal as providers must charge all insurers the same amount. If providers were to comply with this they would lose their Medicare credentials which would lead to losing their BCBS credentials.

I have also heard from Representatives that the insurance companies tell them that once an individual reaches the cap and enters the MCCA system, there is zero incentive to negotiate rates because it's no longer their money being spent.

**Insurance companies are admittedly frivolously spending constituent money and want you to penalize us for their negligent practices.**

I would like to urge all of you to dig deeper than the misinformation being presented by the insurance companies. Michigan is leading the world in spinal cord and traumatic brain injury rehabilitation. Our auto no fault system is something that we've done right- if this system is truly unsustainable then we all have an interest in fixing it but we can't do that with limited information.

Lastly, I was very disappointed to see that several Republican members of the committee left last Thursday just as survivors were starting to testify. For many of us, getting up and out of the house in the morning is not as easy as it is for you. We have woken up extra early, spent an entire day sitting stationary in our chairs, waiting to have our voices heard. While you may have already made your mind up on how you will vote on this legislation, we have a right to participate in the process and as legislators representing the citizens of Michigan, you have an obligation to hear our testimony.

# CORVEL

## Explanation of Review

Insured: [REDACTED]  
 Patient: Erica Nader-Coulston  
 [REDACTED]

Business Unit: Harleysville Insurance Co. Auto  
 PO Box 244  
 Harleysville, PA 19438

Patient DOB:  
 Gender:

Independent Emergency Phys PC  
 Denise A Shuttie M.D.  
 PO Box 672363  
 Detroit, MI 48267-2363



LOB: Auto  
 Site/Bill #: 164/1280060 - 1  
 Reprice: ML 48374

Approved Date: 03/26/2013  
 DOS From - To: 07/21/2012 - 07/21/2012

COPY

Network: Cofinity	Treating Provider: DENISE SHUTTIE	Claim #: W0266783-004
Network Branch: Cofinity - Auto	Referring Physician:	Processor Initials: SLB
Sub Network:	Patient Control #: IEP02592429101	DOI: 10/07/2001
Contract:	Provider Tax Id: 38-3345124	RX Number:
Claim Rep.: VF		
Vendor #:		
PIN:		
Coverage Type: MED PAY		

### Bill Comments

Professional Review Completed by TB, CPC

Date	Code	Units	POS	Bill Charges TOS	DXR	Reduction	Allowed Fees
07/21/2012	99285	EMERGENCY DEPT VISIT	0	\$735.00		\$443.10	\$291.90
	02P, 350	1	23		1,2		
<b>Sub-Totals for Bill: 1280060</b>				<b>\$735.00</b>		<b>\$443.10</b>	<b>\$291.90</b>
<b>Totals for Bill: 1280060</b>							<b>\$291.90</b>

### Line Item Reason Codes and Descriptions

02P Allowance/Review determined by Professional Review 350 Network Allowance

*This bill has been evaluated against the prevailing billing practices for medical providers within your geographic area. The reimbursement rate may therefore be different than the amount billed.*

### ICD9 Diagnosis

590.80 Unspecified Pyelonephritis  
 780.60 FEVER UNSPECIFIED

Questions regarding this bill may be sent to:

Harleysville Insurance  
 PO Box 244  
 Harleysville, PA 19438

Toll free: (800) 491-8350  
 Phone: (856) 532-6000  
 Fax: (856) 661-9800